



Surrey Lodge Group Practice

Statin Decision Aid Cardiovascular Risk 10-20% In Next 10 Years

This decision aid is intended to help you decide whether taking a statin may be right for you. Statins (cholesterol-lowering medications) help to reduce your risk of developing a heart attack, angina or having a stroke. Please use the information in this leaflet to aid your decision. You can discuss this information with friends and family as well as your healthcare professional should you wish.

What is Cardiovascular Disease?

Both coronary heart disease and stroke are diseases where the blood vessels become blocked by a build-up of fats. These fats can narrow your blood vessels. When the blood vessels around the heart become blocked this can lead to chest pain (angina) and a heart attack. When the blood vessels that supply blood to the brain become blocked this can lead to a stroke or 'mini-stroke' (transient ischaemic attack). Sometimes blood vessels that supply the legs can also become blocked leading to pain and discomfort in the legs on exertion. This is called peripheral arterial disease.

Who does this affect?

Cardiovascular disease is the most common cause of death in the UK. It is also a significant cause of illness, disability and poor quality of life. Those with diabetes and chronic kidney disease are at increased risk of cardiovascular disease. Certain lifestyle choices can also increase your risks of developing cardiovascular disease such as smoking, a diet high in fats and cholesterol and a sedentary lifestyle. Those with a family history of cardiovascular disease are also at an increased risk of developing it themselves.

How do I know what my risk is?

Using a clinical risk calculator, we have estimated your likelihood of developing cardiovascular disease or having a stroke over the next 10 years. This is based on your blood test results, age, weight and height, blood pressure, your medical and family history and smoking status. This number can help us make an informed decision on whether statin (cholesterol-lowering medication) therapy to reduce this risk is right for you. However, it is impossible to predict for certain if or when someone may develop cardiovascular disease or have a stroke. The score acts as a guide to help you make an informed choice.

Is there anything I can do to reduce my risk of cardiovascular disease?

The good news is yes there are lots of ways you can help reduce your risk of cardiovascular disease and stroke by implementing some lifestyle measures. If you smoke, stopping smoking can reduce your risk. You can do this with the support of your GP or the NHS "stop smoking services" should you wish.



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Eating a healthy, balanced diet and taking regular exercise can also help reduce your risk of developing cardiovascular disease and having a stroke.

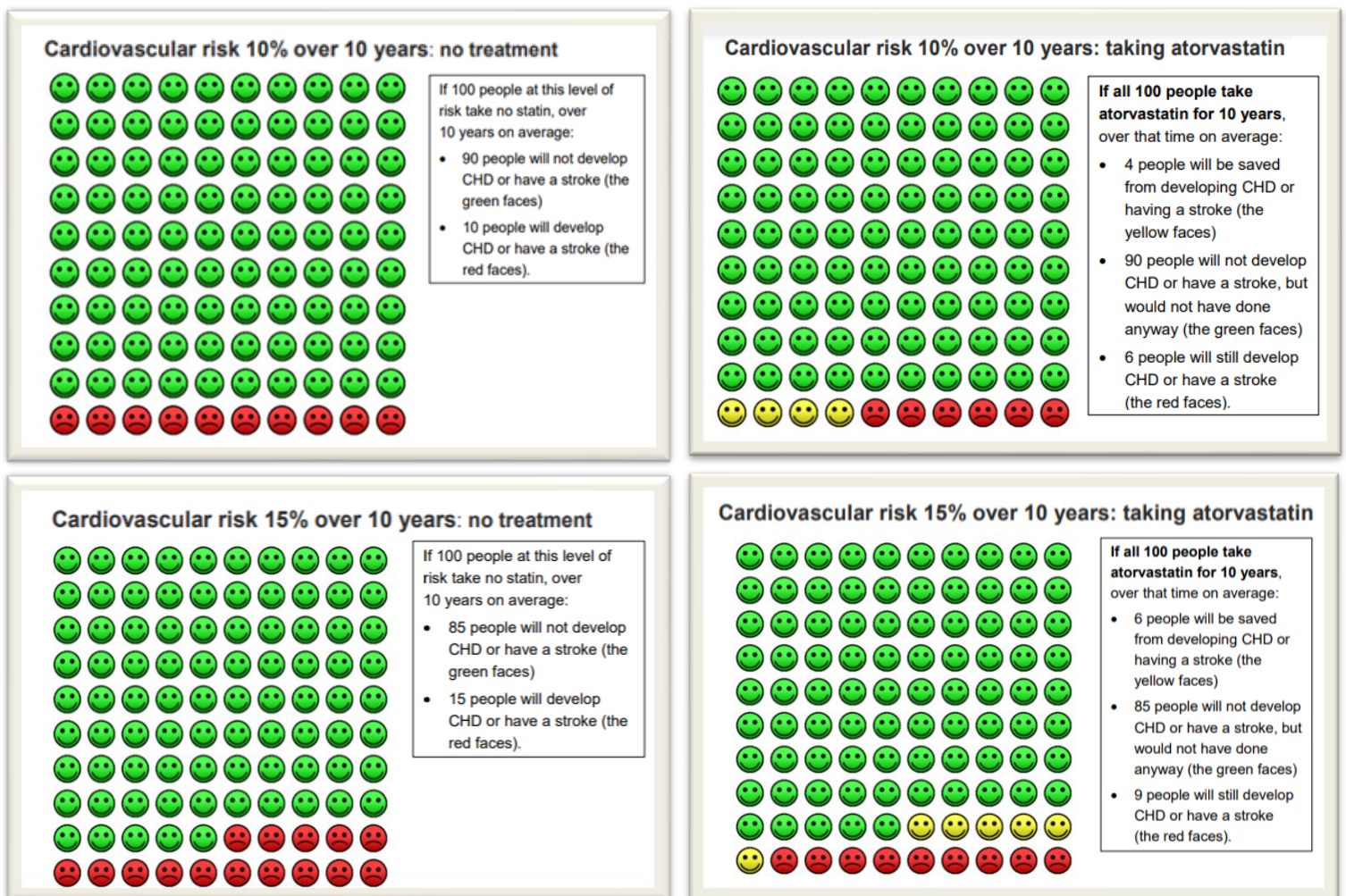
You can try these measures first and then have your risk reassessed after 6-12 months to see if it has come down or you may decide to start a statin straight away whilst also trying to make some of these changes.

You can also decide not to take a statin at all if you wish.

It is recommended that most people who are offered a statin are offered Atorvastatin 20mg once a day. However, there are other statins which may be recommended based on your own health conditions and current medications.

What is my risk and what does this mean?

You have been advised to read this decision aid because your cardiovascular risk has been calculated as between 10-20% within the next 10 years.





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Are there any side effects to taking statins?

Common side effects that can affect up to 1 in 10 people who take atorvastatin are: headache, allergic reactions, gastrointestinal symptoms (nausea, constipation, wind, indigestion, diarrhoea), inflammation of the nasal passages, pain in the throat, nosebleed. There are other less common side effects which you can obtain more information about in the manufacturer's information leaflet.

Some people who take statins experience muscle pain from time to time. On average 2 out of 1000 people a year who take a statin will experience mild muscle pain. Muscle pain is most likely in the first 3 months of taking the medication. Rarely some people can develop muscle breakdown which can lead to kidney problems and can be life-threatening. It is estimated that on average this will occur in 1 or 2 people taking a statin out of every 100,000 each year.

Will I need any regular blood tests?

Before starting a statin, we will check some blood tests and these will be repeated alongside a cholesterol blood test after 3 months of taking your statin and annually thereafter.

Will the statin interact with any other medication or food/drink?

If you are started on Atorvastatin you are advised to limit yourself to no more than 2 small glasses of grapefruit juice a day as more can alter the effects of Atorvastatin. There are some medicines available over-the-counter or on prescription which may interact with statins. Please discuss this with your doctor or pharmacist and read the patient information leaflet with your medication before taking.

Further Information:

British Heart Foundation, 0300 330 3311 www.bhf.org.uk

HEART UK- The Cholesterol Charity, 0345 450 5988 <http://heartuk.org.uk>

The Stroke Association, 0303 3033 100 www.stroke.org.uk

<https://www.nhs.uk/conditions/statins/>

<https://patient.info/heart-health/high-cholesterol/statins-and-other-lipid-lowering-medicines>

<https://www.nice.org.uk/guidance/cg181/resources/patient-decision-aid-pdf-243780159>